

**MOSS v. BALLARD**  
**CASE NO. 2:09cv01406**

**RESPONDENT'S EXHIBIT 33**  
**(Continuation, appendix [bn000040 to 77])**

RECEIPT FOR RETURN OF EVIDENCE

C-79- 2566-A

C-79-2566

The following exhibits in the case number \_\_\_\_\_ were given

to Trooper T. Williams on 03/31/80

by Trooper F. S. Zain

1. Exhibits to above case
2. Plastic
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_

T. Williams

Signature of Officer Receiving Exhibits

Trooper F. S. Zain

Signature of Chemist

Prepare in Duplicate.

000010

<p>① ?</p> <p>pieces of Kato</p> <p><u>Zain 12-13-79</u></p> <p>Williams 3-31-80</p>	<p>② ?</p> <p>Piece of electrical #110B short cord from Vanessa</p> <p><u>Zain 12-13-79</u></p> <p>Williams 3-31-80</p>	<p>③ ?</p> <p>Cloth from back door</p> <p><u>Zain 12-13-79</u></p> <p>Williams 3-31-80</p>	<p>④ ?</p> <p>Scissors</p> <p><u>Zain 12-13-79</u></p> <p><u>Shumate 12-13-79</u></p> <p><del>Williams 1-23-80</del></p>	<p>Green</p> <p>Sh</p> <p>Zain</p> <p>stallie</p>
<p>⑥ ?</p> <p>Eureka Vacuum Cleaner</p> <p><u>Shumate 12-13-79</u></p> <p>Williams 1-23-80</p>	<p>⑦ ?</p> <p>Clock Radio</p> <p><u>Shumate 12-13-79</u></p> <p>Williams 1-23-80</p>	<p>⑧ ?</p> <p>Childrens dish set</p> <p><u>Shumate 12-13-79</u></p> <p>Williams 1-23-80</p>	<p>⑨ ?</p> <p><del>Pate + Pate Sat</del></p> <p><del>Shumate 12-13-79</del></p> <p><del>Williams 1-23-80</del></p>	<p>Cloth.</p> <p>Sopr</p> <p>Willi</p> <p>Zain</p> <p>Will</p>

000011



<p>?</p> <p>back door</p> <p>2-13-79</p> <p>3-31-80</p>	<p>(4)</p> <p>Scissors</p> <p>Zain 12-13-79</p> <p><u>Shumate 12-13-79</u></p> <p><del>Williams 1-23-80</del></p>	<p>(5)</p> <p>Green hand lantern</p> <p><u>Shumate 12-13-79</u></p> <p><u>Zain 12-18-79</u></p> <p>Williams 3-31-80</p>	<p>glassware</p> <p><del>Williams</del></p>
<p>?</p> <p>h set</p> <p>12-13-79</p> <p>23-80</p>	<p>(9)</p> <p><del>Pan + Pan Set</del></p> <p><del>Shumate 12-13-79</del></p> <p><del>Williams 1-23-80</del></p>	<p>(10)</p> <p>Clothing &amp; P. Reggote</p> <p>Sopher 12-13-79</p> <p>Williams 12-14-79</p> <p><u>Zain 12-14-79</u></p> <p>Williams 3-31-80</p>	

<p>?</p> <p>Reggatz</p> <p>12-14-79</p> <p>12-17-79</p> <p>7-79</p>	<p>(14)</p> <p>Blood ?</p> <p>Bernadette Reggatz</p> <p>Sopher 12-18-79</p> <p>Williams 12-17-79</p> <p>Zain 12-17-79</p>	<p>(15)</p> <p>Clothing ?</p> <p>Bernadette Reggatz</p> <p>Sopher 12-18-79</p> <p>Williams 12-17-79</p> <p>Zain 1-7-80</p> <p>Williams 11-73-80</p> <p>3/31/80</p>
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<p>?</p> <p>bullet</p> <p>- the scene</p>	<p>(19)</p> <p><i>M</i> ?</p> <p>Time Card of P. Reggatz</p>	<p>(20)</p> <p>Electrical Cord ?</p> <p>Paul Eric Reggatz</p>
<p>12-13-79</p> <p>- 14-79</p>	<p>David W. M. L... - 12-13-79</p> <p>Rinehart - 12-13-79</p> <p>Williams 12-13-79</p>	<p>Sopher 12/13/79</p> <p>Williams 12/13/79</p>



<p>(21)</p> <p>Electrical Cords-? (white + brown) <del>110A</del> VANESSA Reggettz #110A Sopher 12/13/79 Williams 12/12/79</p>	<p>(22) ?</p> <p>Electrical Cord (Brown) NEAR FEET VANESSA Reggettz Roark 12/13/79 Williams 12/12/79</p>	<p>(23) ?</p> <p>Electrical Cord (white) (Part of cord) cut from VANESSA Reggettz ZAIN 12/13/79 Williams 12/12/80</p>	<p>(24)</p> <p>Chair Dessert ZAIN Will.</p>
<p>(26) ?</p> <p>(1) KODAK CAMERA (From MR. MOSS) (John Moss JR)</p>	<p>(27) ?</p> <p>FIREARMS TRANSACTION Records Forms (HERTS)</p>	<p>(28) ?</p> <p>(2) tubes blood John Moss</p>	<p>(29)</p> <p>Kait</p>
<p>John Moss JR 10/29/80 (Father) Smith + Williams 10/29/80</p>	<p>Ella Light Smith + Williams</p>	<p>Dr. Kaplan 4-22-80 Williams 4-22-80 ZAIN 4-22-80</p>	<p>Shu. ZAIN</p>

<p>(23) ?</p> <p>Electrical Cord (wire)        Piece of cord cut from        JANESEA REGGETT</p> <p>ZAIN 12/13/79        Williams 3/31/80</p>	<p>(24) ?</p> <p>Change PURSE        DRESSER MASTER Bedroom</p> <p>ZAIN 12/13/79        Williams 3/31/80</p>	<p>(25) ?</p> <p>(2) Polaroid Cameras        (1) Kodak Camera        (SEARCH)</p> <p>Smith &amp; Wesson 12/29/80</p>	<p>Wrapping Paper</p> <p>Williams 3/31/80</p>
<p>(28) ?</p> <p>3) tubes blood        John Moss</p>	<p>(29) ?</p> <p>Kate Handle</p>	<p>(30) ?</p> <p>Reggett Blood</p>	<p>(31)</p> <p>Guns</p>
<p>Kepler 4-22-80        Williams 4-22-80        VIN 4-22-80</p>	<p>Shamate 12-13-79        Williams 12-13-80</p>	<p>Wanda Wells 1-2-80        Williams 1-2-80        Inman 1-2-80</p>	<p>30        1-24-80</p>



1.

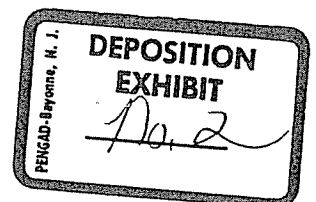
State of West Virginia, Kanawha County, ss:

CIRCUIT  
IN THE ~~INTERMEDIATE~~ COURT OF SAID COUNTY:

The Grand Jurors of the State of West Virginia, in and for the body of the County of Kanawha, and now attending the said Court, upon their oaths present, that PAUL REGGETTZ, III and John Moss, Jr., on the \_\_\_\_ day of December, 1979, and prior to the date of the finding of this indictment, in the said County of Kanawha, feloniously, wilfully, maliciously, deliberately, premeditatedly and unlawfully did slay, kill and murder one Vanessa Dale Reggett against the peace and dignity of the State.

SECOND COUNT: And the Grand Jurors aforesaid, upon their oaths aforesaid, do further present, that PAUL REGGETTZ, III and John Moss, Jr., on the \_\_\_\_ day of December, 1979, and prior to the date of the finding of this indictment, in the said County of Kanawha, feloniously, wilfully, maliciously, deliberately, premeditatedly and unlawfully did slay, kill and murder one Paul Eric Reggett against the peace and dignity of the State.

THIRD COUNT: And the Grand Jurors aforesaid, upon their oaths aforesaid, do further present, that PAUL REGGETTZ, III and John Moss, Jr., on the \_\_\_\_ day of December, 1979, and prior to the date of the finding of this indictment, in the said County of Kanawha, feloniously, wilfully, maliciously, deliberately, premeditatedly and





<p>⑪</p> <p>Blood Specimen ?</p> <p>Vanessa Reggette</p> <p>Sopher 12-14-79</p> <p>Smith 12-14-79</p> <p>Zain 12-14-79</p>	<p>⑫</p> <p>Nightgown of ?</p> <p>Vanessa Reggette</p> <p>Sopher 12-14-79</p> <p>Smith 12-14-79</p> <p>Zain 12-14-79</p> <p>Williams 3-31-80</p>	<p>⑬</p> <p>Blood ?</p> <p>Paul E. Reggette</p> <p>Sopher 12-14-79</p> <p>Williams 12-17-79</p> <p>Zain 12-17-79</p>	<p>⑭</p> <p>Blood</p> <p>Bernade</p> <p>Sopher</p> <p>Williams</p> <p>Zain</p>
<p>⑮</p> <p>?</p> <p>Flatware</p> <p>Mrs Johnson 2-6-80</p> <p>Smith 2-6-80</p> <p>Williams 2-6-80</p> <p>Shumate 2-6-80</p> <p>Zain 2-6-80</p> <p>Williams 3-31-80</p>	<p>⑯</p> <p>?</p> <p>Pieces of gun</p> <p>Williams 12-13-79</p>	<p>⑰</p> <p>?</p> <p>.22 caliber bullet</p> <p>recovered at the scene</p> <p>Williams 12-13-79</p> <p>Lane 12-14-79</p>	<p>⑱</p> <p>Time Card</p> <p>David W</p> <p>Rinehart</p> <p>Williams</p>

IN THE CIRCUIT COURT OF KANAWHA COUNTY, WEST VIRGINIA

JOHN MOSS, III,

Petitioner,

vs. CASE NO. 94-MISC-663

GEORGE TRENT, warden of the  
West Virginia State Penitentiary,

Respondent.

The deposition of DAVID H. BING was taken on

the 5th day of June, 1995, beginning at 1:40 o'clock p.m.,  
at the Kanawha County Judicial Annex, Judge Paul Zakaib's  
Jury Room, 111 Court Street, Charleston, Kanawha County,  
West Virginia, before Barbara Harris, Notary Public and  
Certified Court Reporter, pursuant to written notice, for  
the purposes of discovery and/or to be read as evidence in  
the above-styled matter which is now pending and  
undetermined in said Court.

1 (WHEREUPON, documents were marked  
2 for identification purposes as  
3 Deposition Exhibit Nos. 3, 4, and 5,  
4 and are attached hereto.)  
5 (Witness Sworn.)  
6 MR. SIMMONS: Before we begin, I'd just like  
7 to note for the record that we're taking the deposition of  
8 Doctor David Bing in connection with the habeas corpus  
9 action filed on behalf of John Moss, III. My client has  
10 been notified of the deposition. He also has been informed  
11 that with habeas corpus actions he does not have an  
12 absolute right to be present at all proceedings, and he's  
13 aware of that fact. And that the purpose of taking this  
14 deposition is to make a record on some of the scientific  
15 issues that are set out in the habeas corpus petition and  
16 in an affidavit filed by Doctor David Bing.

17 And also I would note for the record that  
18 three exhibits have already been marked. Deposition  
19 Exhibit 3 is the recent curriculum vitae of Doctor David  
20 Bing. Deposition Exhibit 4 is an affidavit executed by  
21 Doctor Bing, executed on May 26, 1995, and that's an eight-  
22 page document. And then Deposition Exhibit No. 5 are  
23 tables that were included in the habeas corpus petition

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APPEARANCES: On behalf of the Petitioner:

LONNIE C. SIMMONS, Esquire  
DiTrapano & Jackson  
604 Virginia Street, East  
Charleston, West Virginia 25301

On behalf of the Respondent:  
MARY BETH KERSHNER, Esquire  
Assistant Prosecuting Attorney  
111 Court Street  
Charleston, West Virginia 25301

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Examination by

Witness	Mr. Simmons	Ms. Kershner
DAVID H. BING	4	46
Exhibits	Identified	
Deposition Exhibit No. 3		3
Deposition Exhibit No. 4		3
Deposition Exhibit No. 5		3
Reporter's Certificate - 51, 52		

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1 which summarize the various findings made from the blood  
2 testing that was performed in this case.  
3 THEREUPON came  
4 DAVID H. BING,  
5 a witness herein, who, after having been first duly sworn  
6 to tell the truth, testified as follows:  
7 EXAMINATION  
8 BY MR. SIMMONS:  
9 Q Doctor Bing, first of all, I'd like to ask  
10 you to glance at Deposition Exhibit No. 3 and confirm  
11 whether or not that's a copy of your most recent curriculum  
12 vitae.  
13 A (Witness examines document.) Yes, it is.  
14 Q You note in the affidavit that you are the  
15 Scientific Director of Laboratories of CBR Laboratories in  
16 Boston, Massachusetts. Could you generally describe what  
17 CBR Laboratories does?  
18 A CBR Laboratories is a licensed medical  
19 diagnostic testing laboratory. It performs medical  
20 testing, diagnostic testing for physicians and primarily  
21 the Harvard Medical School hospitals. It does testing in  
22 the areas of immunohematology and hematology. About  
23 eighty-five percent of its work now is involved in DNA

1 diagnostic testing, but we still maintain a very active  
2 profile in the area of blood typing and the analysis of  
3 genetic markers in blood based on blood typing and also  
4 analysis of serum proteins. It's a part of the work that  
5 we do in terms of paternity testing.

6 Q Okay. Approximately how long have you been  
7 the Scientific Director of Laboratories at CBR?

8 A Well, my current title is Director of  
9 Clinical Testing, and I've really been in that position  
10 since 1986.

11 Q Can you also generally describe -- Focusing  
12 on the forensic testing, could you generally describe the  
13 kind of forensic testing that is conducted at CBR?

14 A The type of forensic testing that is done  
15 primarily focuses on DNA typing methods, particularly  
16 those -- the two principle kinds of DNA typing methods, the  
17 RFLP, which is known as Restriction Fragment Length  
18 Polymorphism, P-o-l-y-m-o-r-p-h-i-s-m, Polymorphism, and  
19 the Polymerase, P-o-l-y-m-e-r-a-s-e, Chain Reaction  
20 Methodology.

21 But the laboratory does paternity testing,  
22 and in the area of paternity testing we do a full panel red  
23 cell antigen typing, serum proteins, genetic typing of

1 serum proteins, HLA, and when required, we will -- We don't  
2 do it in our laboratory, but we will send out for analysis  
3 of red cell enzymes, such as phospho, gluco, mutase,  
4 abbreviated PGM, Esterase D, abbreviated EsD.

5 We do glyoxalase testing in our laboratory.  
6 We still do that. That's for glow. But we don't do all  
7 the red cell enzymes. But we use them on occasion in our  
8 paternity testing results and use the genetic typing  
9 information that is in these systems in terms of arriving  
10 at a conclusion.

11 And I'm accredited for doing that kind of  
12 work because I'm accredited by the American Association of  
13 Blood Banks as a technical director for paternity testing,  
14 which means I have to be able to use those systems in our  
15 work.

16 Q So prior to the development of DNA testing,  
17 did CBR Laboratories and yourself routinely perform, I  
18 think what you called the red blood cell typings?

19 A It did, and it still does. At the point  
20 when I took over the laboratory it was still doing this  
21 kind of work and still is doing it today.

22 Q I think you mentioned that the laboratory  
23 was generally licensed. I just want it to be clear in the

1 record. What kinds of licenses are you referring to?

2 A These are medical diagnostic testing  
3 licenses. We are certified in the Commonwealth of  
4 Massachusetts. We have a license in the state of  
5 Connecticut, the Commonwealth -- maybe the state of  
6 Maryland, the state of New York. We have a CLIA, that's  
7 C-L-I-A, license from the Health and Human Services which  
8 allows us to accept blood samplings from other states for  
9 clinical testing. And we do paternity testing in almost  
10 every state except New York State, so that this is a kind  
11 of testing that involves kind red cell genetic -- serum  
12 protein genetic typings that I've just described.

13 Q Okay. I'm not sure about this answer or  
14 not, so I'll ask you, is your laboratory involved with  
15 ASCLD, A-S-C-L-D, or its accreditation program or whatever  
16 they refer to it?

17 A I have petitioned to join ASCLD, which  
18 stands for American Society of Crime Lab Directors, and my  
19 application is currently undergoing review. I have a  
20 letter that I have to respond to. It's laying on my desk  
21 right now. And I anticipate that this summer the  
22 laboratory will be submitting an application to ASCLD Lab  
23 to be accredited. You have to be doing forensic work for

1 at least five years before you're eligible to apply to  
2 ASCLD. We consider that we really started around the  
3 middle of 1990, so the middle of 1995 is the time of year  
4 eligible to apply.

5 The laboratory adheres to the rules for DNA  
6 forensic analysis articulated by the technical working  
7 group on DNA analysis methods, and based on what I've seen  
8 in the ASCLD accreditation manual, you know, how to do it,  
9 the laboratory follows, for the most part, the regulations  
10 of ASCLD Lab, because in many, many instances they're  
11 identical to the regulations that we follow for our  
12 clinical license.

13 Q What is your involvement in TWGDAM,  
14 T-W-G-D-A-M?

15 A I'm just a member of the committee. There's  
16 sixty people on the committee made up of crime lab  
17 directors around the country. I'm the representative from  
18 the Human Identity Trade Association, which is a collection  
19 of private testing laboratories that have representation on  
20 this committee.

21 Q Okay. Can you explain what the significance  
22 of TWGDAM is?

23 A Well, in 1983 -- no, not 1983 -- 1989 or so



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1 it became imperative for there to be some kind of consensus  
2 about how DNA testing should be done for forensic purposes  
3 here in the United States. A group of people was assembled  
4 at the FBI made up primarily of crime lab directors from  
5 public laboratories, and their job was to articulate  
6 guidelines for laboratories undertaking DNA analysis  
7 methods and guidelines for systems that were to be adopted  
8 for DNA analysis methods. And these guidelines really  
9 follow, for example, the rules -- or I mean they're very  
10 similar to the rules that we use that we have from the  
11 American Association of Blood Banks, where we're accredited  
12 for paternity testing. They're almost identical in every  
13 respect.

14 People have to have the proper training.  
15 They have to be in place. There are procedures in the  
16 laboratories. Systems that are used for doing the testing  
17 have to follow certain scientific principles and obey  
18 certain kinds of genetic rules. It's very much the same.

19 Q And I guess the final area of your  
20 credentials, you noted in the affidavit that you were  
21 qualified as an expert in molecular biology, forensic  
22 science, and genetics in the case of Glen Dale Woodall  
23 versus Carl Legursky. That was in Cabell County. Is that

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1 correct?

2 A That's correct.

3 Q And you were also qualified as an expert in  
4 those particular fields in the case Paul William Ferrell  
5 versus William Duncil, which was in Grant County; is that  
6 correct?

7 A That's correct.

8 Q And in both the Woodall and Ferrell cases,  
9 your expertise involved not only performing DNA testing,  
10 but also reviewing the protein and enzyme typing that had  
11 been performed by other scientists?

12 A Yes, I was asked to do that, and I testified  
13 about that in court.

14 Q Okay.

15 MR. SIMMONS: I'm not exactly sure how you  
16 want to do this, Mary Beth, if you wanted to ask him a  
17 question, I would now offer him as an expert in molecular  
18 biology, forensic science, and genetics in the present  
19 case.

20 MS. KERSHNER: I don't have any objection.

21 BY MR. SIMMONS:

22 Q Okay. Turning to the Moss case -- and I'll  
23 try to get through some of this preliminary stuff quickly

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1 just by going through the affidavit -- you note that in  
2 connection with Moss versus Duncil you reviewed a copy of  
3 the autopsy report that's dated December 13, 1979 that was  
4 performed by Doctor Irvin Sopher; is that correct?

5 A That's correct.

6 Q Okay. You generally reviewed the Petition  
7 for Writ of Habeas Corpus that was filed in this case?

8 A Yes, I did.

9 Q Okay. You reviewed a copy of Fred Zain's  
10 testimony from the first and second trials in the Moss  
11 case?

12 A Yes, I did.

13 Q Okay. You reviewed a copy of the laboratory  
14 notes and other documents that were produced by the State  
15 in this Moss case?

16 A Yes, I did.

17 Q And I believe -- Let's see. Yes, I believe  
18 that's all the materials you reviewed, other than I think  
19 maybe I sent you the -- I may have sent you the deposition  
20 of Robert Murphy. Do you recall seeing that?

21 A Let me check my notes. Well, no, I don't  
22 have the deposition of Robert Murphy.

23 Q Okay. I may not have sent it to you. I

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1 wasn't sure if I had or not.

2 In the materials you reviewed from the Moss  
3 case, you note in your affidavit that there were no  
4 photographs of the electrophoretic gels. First of all, I  
5 just wondered if you would explain how photographs of those  
6 gels would have assisted you in your analysis of the  
7 testing?

8 A This type of genetic typing, at least the  
9 enzymes, is based on looking at patterns of the proteins  
10 that are being tested under conditions where they move in  
11 an electric field. And they will move differently in an  
12 electric field depending on what genetic type they are  
13 reflecting, so that what this -- what these photographs do  
14 is allows one to look directly at the results of this  
15 testing and correlate that with the actual recorded test  
16 results.

17 In our laboratory it's standard practice to  
18 make a photograph of every single genetic typing that we  
19 do, and that photograph is maintained for as long as keep  
20 these files.

21 Q So without being able to review the  
22 photographs of the electrophoretic gels that were performed  
23 in this case, you have no basis for determining whether or

1 not the typings that were determined to have been found are  
2 correct or accurate or not?

3 A I have the -- I gather there's a sworn  
4 deposition from Mr. Murphy that attests to the accuracy of  
5 these results. I haven't read it, but I would imagine that  
6 it does. Certainly the notes agree with what the final  
7 reports are. But as in all kinds of testing, what one  
8 hopes for is the opportunity to see the results to see if  
9 there's any kind of difference in opinion in terms of  
10 interpretation of those results, because there can be  
11 widely differing interpretations of test results. So in  
12 the absence of being able to do that, it's very difficult  
13 to really validate the test results that are recorded in  
14 the worksheets that I did have the opportunity to review.

15 Q You also note in your affidavit that you are  
16 generally aware of the special investigation into testing  
17 performed by Fred Zain. I just wonder if you could state  
18 generally how many cases involving Fred Zain have you  
19 reviewed as an expert?

20 A Well, there's Woodall -- the Woodall case.  
21 Did Zain work on the Ferrell case?

22 Q No, that was the FBI.

23 A That was the FBI. Okay. The case called

1 but they're not -- To the best of my recollection, in no  
2 case was there a complete set of what I would call raw data  
3 that was available for review, although there was partial  
4 results.

5 In no case were any photographs available  
6 for review, in no case. It's not the practice of every  
7 forensic lab to take photographs. I would be the first to  
8 admit that. But I think in light of what this is going to  
9 be used for, I think it is -- it's not an unreasonable  
10 practice to have photographic documentation of test results  
11 where the test results are based on interpretation of  
12 patterns that are seen and not measured on an instrument or  
13 something.

14 Q You also note in your affidavit that there  
15 was no protocol provided, and I believe, even though you're  
16 not familiar with Mr. Murphy's deposition, his testimony  
17 was that there was no protocol, written protocol, back in  
18 1979. I just wonder if you would explain what is the  
19 significance of having a written protocol in a forensic  
20 laboratory.

21 A It essentially is a documentation of how the  
22 test was conducted and how -- most protocols usually also  
23 have some indication about how the results are interpreted.

1 West Virginia versus Davis, I think Mr. Zain worked on that  
2 case. The case of West Virginia versus Harris, he worked  
3 on that case. I believe there's a case of West Virginia  
4 versus Richardson, I think Mr. Zain worked on that case.  
5 And also a case of West Virginia versus McClure, I've  
6 worked on that case. And there's a case of West Virginia  
7 versus Ward, and I've worked on that case.

8 Q Okay.

9 A And there are others that are still pending.

10 Q Had you previously reviewed any of the  
11 documentation that was developed by the special  
12 investigation into Fred Zain's work in West Virginia?

13 A I read the ASCLD summary review.

14 Q In reviewing the Fred Zain cases, just  
15 generally speaking, that you mentioned, have you generally  
16 found what, in your opinion, were certain problems with  
17 some of his work?

18 A Each case is different, and the  
19 circumstances of each case are different. But overall one  
20 of the difficulties in reviewing these cases is that all  
21 that's been available for review has been the summary  
22 worksheets on which the results were finally recorded. And  
23 then there's some original worksheets in some of the cases,

1 And protocol will document how you set up the test, the  
2 agents and things that go into making the test. It's sort  
3 of like a recipe for -- You know, you could sort of draw an  
4 analogy.

5 What the scientist is doing in the  
6 laboratory is actually baking the cake, and protocol is the  
7 recipe for what goes into making that cake. If the recipe  
8 calls for making chocolate cake and you have a lemon cake  
9 instead, you could ferret that out by looking at the  
10 protocol and say, you know, you didn't get the result that  
11 you thought you were going to get based on the protocol  
12 that's outlined.

13 Q Would it be correct to say that a written  
14 protocol would help standardize the practice in the  
15 laboratory, if, in fact, that written protocol were  
16 followed?

17 A Well, that's one of the requirements by  
18 ASCLD Lab now. ASCLD Lab does other things besides DNA.  
19 For example, it accredits laboratories in the area of  
20 serology. And a written protocol is one of their absolute  
21 requirements. Now, ASCLD Lab, this is an evolving  
22 organization, and this has really only begun to happen  
23 around 1990, '91, '92 that these have begun to evolve, is

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1 my understanding.

2 Q You mean the ASCLD Lab requirements?

3 A ASCLD Lab was always available for  
4 accrediting laboratories, but pretty much prior to 1990 not  
5 many laboratories really applied for that accreditation  
6 because it wasn't really a very strong organization. That  
7 may not be fair to say. It wasn't an organization to which  
8 laboratories looked for guidance in terms of establishing  
9 standardized protocols in their laboratory.

10 With the need for standardization in the  
11 forensic genetic testing field, and serology is part of  
12 that field, ASCLD Lab has always been there and has stepped  
13 forward and is providing this service to laboratories that  
14 allows them to become standardized within the field. So  
15 it's always been there. It's just that it's only recently  
16 that its importance has become emphasized in forensic  
17 laboratories.

18 Q Would you say that -- And, again, this case  
19 dates back to 1979. Do you have any basis for  
20 understanding or stating that in 1979 most forensic  
21 laboratories would have some written protocol or would that  
22 have been unusual?

23 A No, that wouldn't have been unusual. For

1 quality control/quality assurance program, there still  
2 was -- they still could have run positive and negative  
3 controls on every single sample that was run so they could  
4 internally QC any given run.

5 As near as I could -- There's no evidence in  
6 any of the notes that the agents were checked with these  
7 controls prior to any of the runs, for example, to make  
8 sure that the red cell antigens -- The glutinating agents,  
9 called the antisera or antibodies that are used in red cell  
10 glutinations, you normally check them before you do a run  
11 to make sure they're working, and those are usually  
12 recorded in the notes of a run.

13 Controls are usually run of electrophoresis  
14 of known samples. PGM, for example, there's a known  
15 standard that contains all the known types, and that's  
16 always run in parallel with the unknowns just to do a  
17 control on that.

18 So those kinds of things could have been  
19 done in 1979. It's just a matter of the laboratory  
20 director's decision as to whether or not those should be  
21 done. But I mean, for example, in our laboratory we were  
22 doing -- The CBR Laboratories, even though I wasn't in  
23 charge of it, but in 1979 I can show you work pages where

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1 example, I have -- in my collection of protocols I have a  
2 protocol from the FBI dated 1974 which outlines all  
3 procedures for doing serological analysis of forensic  
4 samples. So laboratories were well aware that these  
5 protocols existed, and, you know, if you wanted to, you  
6 could just adopt the FBI protocol, drop into your  
7 laboratory, and say, "This is what we're going to do." It  
8 was freely available to all the public testing laboratories  
9 and still is.

10 Q On a different issue -- And, again, I'll  
11 represent to you that Mr. Murphy testified that in 1979 the  
12 West Virginia laboratory did not have a formalized quality  
13 control/quality assurance program, and they did not, for  
14 example, test some of the enzymes and other materials used  
15 in the testing on a regular basis to make sure that those  
16 items were appropriate for use in testing. I wonder if  
17 you'd explain the importance of having a quality  
18 control/quality assurance program in a forensic laboratory.

19 A Well, again, quality assurance and quality  
20 control is something that has become recognized over the  
21 past five or six years as being important in a forensic  
22 laboratory. And most laboratories are doing this now.  
23 Prior to that time, even if a laboratory didn't have a

1 all of the -- and photographs of gels where controls were  
2 run on every single run that was done. So it's good  
3 laboratory practice and generally acknowledged by people  
4 who ran laboratories at that time as being important things  
5 to do.

6 Q In your review of the documentation provided  
7 by the State in connection with the testing, you noted in  
8 your affidavit that none of the original notes of the work  
9 performed were made available to you. What was your basis  
10 for making that assertion?

11 A Well, most of the documentation I received  
12 were reports, handwritten summaries that eventually became  
13 the reports, summaries of -- I call them worksheet  
14 summaries, in other words, all the composite results were  
15 listed of the samples tested. Now, there should be a  
16 notebook or some kind of backup to that information. It  
17 just isn't there.

18 Q Have you reviewed -- or generally speaking,  
19 in your review of the Fred Zain cases that you mentioned,  
20 have you seen some cases where the original notes were  
21 included?

22 A There were some where the original notes  
23 were available, yes.



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1 Q What is it about the original notes that  
2 distinguishes them from the summary sheets you described?

3 A Well, they are -- Some of these original  
4 notes will have, like, for example, I've seen -- I'm  
5 trying -- I can't remember the case exactly, but there were  
6 some PGM results where it was possible to sort of track  
7 down through these handwritten notes where the original  
8 results were recorded. And in some instances there would  
9 be a place where controls were run, and they, in fact, were  
10 run and recorded, and other places where there were  
11 controls that were supposed to be run and it was just left  
12 blank, so it meant they weren't run or they weren't  
13 recorded, one or the other. I didn't have any of that kind  
14 of documentation with this particular case.

15 Q In the affidavit you've generally summarized  
16 that -- and this is in number 15 of the affidavit -- that  
17 these various problems, lack of documentation, no protocol,  
18 in your opinion, render the scientific data in this case  
19 meaningless. I just wonder if you could elaborate on that  
20 statement.

21 A Well, by that I mean that the -- there is so  
22 much data on these stains that weren't analyzed, it would  
23 seem to me there should be some extensive notes backing

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1 that material up. So that in that -- in the context of not  
2 being able to look at the backup data, other than the  
3 summaries, it becomes, you know, almost impossible for me  
4 to either agree or disagree with the final outcome of the  
5 results. And that's what I mean by when I say it's  
6 meaningless. I can't agree, I can't disagree. All I can  
7 say is what was reported.

8 Q You next generally state that for purposes  
9 of your review, that even assuming the accuracy of the  
10 typings in this case, the conclusions were flawed for  
11 several reasons. And we'll go through those and maybe, to  
12 the extent that you can, illustrate any of these with  
13 specific examples, it would be helpful to do so. And if  
14 you want to diagram anything that you feel might help  
15 explain something, I'll make my legal pad available for  
16 you, and we can make that an exhibit.

17 One of the first general ideas or principles  
18 you stated was that where blood samples are discovered at  
19 an alleged crime scene, it's important to identify the  
20 types of the known possible donors of that blood. I wonder  
21 if you'd explain why that is the case.

22 A Well, forensic testing is designed to  
23 exclude. That's why this testing is done. It's designed

1 to exclude the person who is false -- who is not the true  
2 biologic donor of a given sample. So that to that extent,  
3 one tests, and if one has no exclusion, you keep testing  
4 and testing and testing until you reach sort of the end of  
5 what you're able to test for. At that point if you have no  
6 exclusion, then you can, at that point, make some kind of  
7 comment about how often you might expect to find this  
8 combination of markers.

9 But in the meantime, if there are people who  
10 are potential donors to these samples, scientifically you  
11 want to be able to test all the people who might be true  
12 biologic -- who are candidates to be true biologic donors  
13 of these samples. So if there are other people involved  
14 besides the people who were involved in this report, they  
15 really should have been -- they should be included in the  
16 testing panel, if it's possible. And it's not always  
17 possible, and I'd be the first to acknowledge that.

18 Q Okay. You state that under the facts of  
19 this case that, at a minimum, the persons who lived in the  
20 Reggettz house, which would include the three victims,  
21 Vanessa Dale Reggettz, Paul Eric Reggettz, and Bernadette  
22 Reggettz, and then the father, Paul Reggettz, III, would be  
23 known possible donors of blood; is that correct?

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1 A That's correct.

2 Q And as far as you know, based upon your  
3 review, you're not aware of any other known possible donors  
4 of blood in the Reggettz house?

5 A No.

6 Q The second point that you make is that only  
7 those types identified from blood found at the alleged  
8 crime scene that are different from the types of the known  
9 possible donors provide information relevant to a  
10 determination as to the source of the blood evidence found  
11 at the crime scene. I wonder if you could explain that,  
12 and if you feel that an illustration is appropriate, do  
13 that.

14 A Well, let me try to explain it, and then, if  
15 necessary, I can provide an -- do a drawing. The -- At a  
16 crime scene, when stains are collected, the origin of those  
17 stains is unknown, so one always has to make the -- one  
18 can't make any assumptions about the potential -- about who  
19 the donors are. But more important, one cannot make an  
20 assumption that any given blood stain collected at a crime  
21 scene is from a single source. So if one wants to  
22 distinguish possible sources of that blood and you have a  
23 group of people who all have that -- all have a given type,

1 then that type doesn't really help you distinguish the  
2 source of that blood, because you can't assume that it's  
3 not a mixture.  
4 Think of it another way. Suppose that the  
5 distinguishing factor of a blood stain was something that  
6 you can actually visualize. Suppose that you could look at  
7 this blood stain and you could say unequivocally, "I know  
8 that that blood stain came from somebody who has brown  
9 hair." Brown hair is a genetic marker. In some ways it's  
10 very similar to, say, a blood type antigen because there is  
11 a certain -- The color or the reason it's brown is due to  
12 certain genetic markers that result in color. So you say I  
13 know -- It doesn't make any difference how I know it. I  
14 know this blood stain is from somebody who has brown hair.  
15 Now, you get your list of possible donors to that and you  
16 -- and they all have brown hair. You can't say that any  
17 one person is more likely than another to be a donor to  
18 that blood stain.  
19 Now, let's say if we can do a little bit  
20 more. Let's say, "Well, I can" -- "I know that the person  
21 who contributed to this blood stain has brown hair and is  
22 left-handed." So you now look at your candidates, and you  
23 look at them and you say, "Well, three of them are left-

1 handed and say two are right-handed." Well, the two who  
2 are right-handed are automatically eliminated, but you  
3 still can't distinguish between the other three because  
4 left-handedness and brown hair color are the same in all of  
5 them.  
6 So that if you have a series of markers and  
7 they're identical in all the people that are being tested,  
8 then you can't really use that to try to distinguish the  
9 source of a given blood stain. You can only look to the  
10 differences, not to the similarities, because the question  
11 that is being asked here, the scientific question that is  
12 being asked is who could possibly be a biologic donor to  
13 this blood stain.  
14 And, secondly, I don't know whether there's  
15 a single person or from a bunch of people. As I stated in  
16 my affidavit, is it a single source sample or many people  
17 are sources of the sample. So you have to look to the  
18 differences between individuals who you test rather than to  
19 their similarities.  
20 Q Okay. The next general point you have in  
21 your affidavit is that where a type from a known possible  
22 donor of the blood matched the type from the blood  
23 discovered, it is not appropriate to include that type in

1 calculating the frequency that the blood was deposited by a  
2 suspect. Now, you may have already gone through that  
3 somewhat. You have a specific example. That might be one  
4 where going through a specific example from the table or  
5 from your affidavit might be helpful to illustrate that  
6 point.  
7 A Well, the -- again, the focus here is on the  
8 unknown sample, and if there are any similarities there  
9 between that blood sample and all of the people that are  
10 involved, even -- I mean suppose it's -- suppose it's  
11 something really --  
12 Let's take another genetic typing you can  
13 sort of visualize. Let's suppose that the blood sample  
14 that you know came from somebody who has got brown hair, is  
15 left-handed, and is an albino, has no pigment color in  
16 their skin at all. Albinism is a very rare occurrence in  
17 the human population. It's very rare indeed. Now, at that  
18 point, the fact that you now have three individuals who are  
19 left-handed and have brown hair, but only one of them is an  
20 albino. You say that's a very rare event. It could only  
21 have been that person.  
22 So you can now use that to reason backwards  
23 and say, "Alright, albinism is a very rare event, so I know

1 that this blood stain came from an albino." That could  
2 only have occurred in one out of a very few number of  
3 people who have this inherited genetic trait.  
4 That is separate from the question of  
5 saying, "How often is the combination of brown hair, left-  
6 handedness and albinism found in the general population?"  
7 That's a separate question. That's how often do I find  
8 these together in the general population. You can make  
9 that estimate as well. But that's a general question about  
10 the population. That is not a question about the sample.  
11 The only thing that distinguishes that sample is what is  
12 different about that sample than is in the known  
13 individuals that you're testing. So you've got a -- Those  
14 two things have to be kept separate.  
15 And that's what I mean by this, that you  
16 can't take a combination of factors that are found in the  
17 general population and relate it to a specific sample. All  
18 you can say is that if these are present and I now have  
19 data to show that are indeed present, this is how often I  
20 would expect to find that combination of markers in the  
21 general population, providing they are behaving and acting  
22 independent of each other, because that's the other issue  
23 in terms of being able to do that, they have to be behaving

1 independently. They have to be what we say scientifically,  
2 they sort independently.

3 Q I think the specific example that you have  
4 in the affidavit, I'd like for you to go ahead and turn to  
5 that one, as well.

6 A Uh-huh.

7 Q Well, you quoted the report where the  
8 statement is made that, quote, "The combination of blood  
9 groups O, PGM 1+1-1, AK 1, EAP BA, EsD 2-1, ADA 1,  
10 GLO 1 2, Hp2-1, and Gc 1 occurs in approximately 0.03% of  
11 the population." In connection with that statement, you  
12 assert that the conclusion implies that all of the blood  
13 typings obtained from the crime scene for these particular  
14 items were the same as all the blood typings obtained from  
15 Mr. Moss. And I wondered if you would give an example of  
16 what you mean where you believe that that general  
17 conclusion is inaccurate or overstates.

18 A Well, for example, there's an item called  
19 flashlight.

20 Q Do you have the item number?

21 A It's item -- It doesn't have an item number,  
22 it just says flashlight. It's on Table II. It continues  
23 the last page of Deposition Exhibit No. 5.

1 Q Okay.

2 A There -- What it is is that there's -- It  
3 just says PGM 1, so we don't know if it's 1+1- or 1+, 1-.  
4 You know, there's three possibilities. It could be 1+, it  
5 could be 1-, it could be 1+1-. So we don't know whether or  
6 not the 1+1- is there or not. No result was contained  
7 in -- was obtained Haptoglobin or Gc. That's Hp and Gc.  
8 So to take this figure here and apply it to this sample  
9 here is not -- implies that this combination of factors  
10 here would be found in that.

11 Now, in contrast, I mean, if I didn't point  
12 it out now, I'm sure someone would point it out to me,  
13 there is one result here where there is a complete match  
14 between Mr. Moss and a stain found at the crime scene.  
15 That's item seven, the kitchen door curtain. And that's  
16 also the case reported on the clothing of Bernadette  
17 Reggett, which is the very last line of Table II, and  
18 Christmas wrapping paper, which is the next to last -- is  
19 the third to the last line of Table II.

20 Now, there -- The results are here reported  
21 to match the types that are reported for Mr. Moss. So at  
22 that particular point, if these results are indeed correct,  
23 then at that point it is fair to do a calculation and say,

1 "I would expect to find these series of markers in a  
2 certain percentage in the population." But it relates to  
3 the general population, it doesn't relate to the sample.  
4 The sample is specific to the forensic situation that's  
5 being investigated.

6 Q So is your point that the conclusions  
7 reached should have been based upon the specific types  
8 found from each particular item tested, as opposed to using  
9 the general population figure and implicitly saying that  
10 all those types were obtained from all the evidence?

11 A If that's -- If that was the intent, to  
12 implicitly say that this is the type that was found on all  
13 of these items, that would be incorrect. On the other  
14 hand, those three items it would have been fair to make  
15 this conclusion. But it wouldn't have been fair to make  
16 that conclusion about the flashlight.

17 Q I think the next sort of general principle  
18 that you talked about in your affidavit is that it is only  
19 proper to combine the frequencies on types obtained from a  
20 blood sample where results, in the absence of any other  
21 data, are consistent with the blood sample coming from a  
22 single source. And you follow that up with a statement  
23 that -- Well, let's start with that statement. Why don't

1 you -- Those two points, number 29 and 30 of the affidavit,  
2 they may sort of relate to each other, but if would just  
3 generally explain that idea.

4 A Well, I think in my previous direct  
5 testimony I said that one of the inherent difficulties with  
6 serological testing is there's no way to know whether or  
7 not a blood sample is a mixture or a single source. The  
8 only samples that you really know are truly single source  
9 samples are the samples that are taken directly from  
10 somebody be they alive or dead. You know where those come  
11 from, so that that -- And there's no way, to my knowledge,  
12 anyway, to, for example, decide whether or not a blood  
13 stain is a single source sample. It's very difficult to  
14 do.

15 Now, as I'm sure will be pointed out, if you  
16 have series of markers, I couldn't say that it wasn't a  
17 single source. I mean, for example, take item 7, the  
18 kitchen door, I couldn't say that that's not a single  
19 source, but I have no way of scientifically sorting that  
20 out. It could be a mixture of a whole bunch of people, for  
21 all I know. And there's no way to sort that out.

22 So I think that in describing the results of  
23 testing, by this, I think that one has to be very cautious



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1 about overstating what the meaning is of these kinds of  
2 calculations. They are an accurate calculation. I don't  
3 disagree with the 0.03%. My tables are a little different  
4 than the ones they us, so it's probably -- I came up with  
5 something like 0.05%. That certainly is close enough. As  
6 far as I'm concerned, it's the same number.

7 But the -- I don't know that these are  
8 single samples. And the other thing that I have to go back  
9 to is, is that I have no way of verifying these really very  
10 important data as they relate to this case.

11 Q Okay. Let me -- You've mentioned the  
12 example of item number 7, the kitchen door curtain, and in  
13 that example typings apparently were obtained in the --  
14 Let's see. It looks like that's nine different groups that  
15 were tested. In the table, the particular types in bold  
16 are types that are similar to or identical to known blood  
17 types from some of the other -- from some of the known  
18 possible donors of blood in the Reggett home. And I just  
19 wanted to make sure I understand when you're talking about  
20 calculating the frequency of this particular sample. Are  
21 you saying that, for example, since the ABO for the kitchen  
22 door curtain was found to be O, but there are known  
23 possible donors in the Reggett house who are O, that you

1 of the BA on this kitchen door stain, number 7. So that's  
2 where they have that in common. The ones where they aren't  
3 in common is the 1- is something -- no, the 1+ is the one  
4 type that is not seen in anybody.

5 Q Okay. The PGM 1+ --

6 A PGM 1+ is a type not seen in anybody.

7 Q Okay. So you would use that?

8 A That's right.

9 Q And what else in item number 7 would you  
10 use? I think it's kind of hard to tell what's bold and  
11 what's not. It looks like the --

12 A Gc 1 --

13 Q Okay.

14 A -- because everybody in the Reggett  
15 household is 2-1.

16 Q Okay. So would --

17 A And Esterase D. Everybody in the Reggett  
18 household is a 1, this sample is a 2-1. So I don't know --  
19 I can use the 2 as a distinguishing factor, but I can't  
20 really use the 1. So the frequencies of each one of these  
21 alleles is no. You know, we know how often the 1+ would be  
22 found and how often the 2 would be found and how often the  
23 1 would be found, and because they occur together, you have

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1 should not include that particular typing in calculating  
2 the population frequency for item number 7?

3 A Everybody in this case tested as type O  
4 blood.

5 Q Yes.

6 A So as far as this is -- this marker is  
7 concerned, this does not provide me any information about  
8 that particular sample. So if I were doing this  
9 calculation, I would not use the fact that approximately  
10 forty percent of Caucasians are type O blood --

11 Q Okay.

12 A -- to this sample.

13 Q Right.

14 A I mean, I think I've stated before, I would  
15 use it in saying how often would I expect to find this type  
16 in combination with all the others in the general  
17 population. That's a valid calculation. But with respect  
18 to this sample, I would say, "What I'm going to look to is  
19 I'm going to look to the differences," and say, "How often  
20 would I expect to find that difference?" So, for example,  
21 here is -- there's a place where the EAP is -- even there,  
22 there still is a person in the Reggett household who is  
23 BA, so I'd have to consider that person as a possible donor

1 to look at the frequency of them as they occur together.  
2 So you could actually use -- you would actually use the  
3 frequency of 1+ or 2-1 and 1 here. But that would allow  
4 you to say, "This unique set here is found in a certain  
5 portion of the population." And that is specific to this  
6 sample.

7 Q Okay. And it's a thing that's a good  
8 example. I think the -- maybe the last general statement  
9 in the affidavit is that -- and this may, again, repeat  
10 something you've already said -- was that each of the types  
11 found from each individual sample must be treated  
12 separately rather than in conjunction with each other,  
13 because it is not possible, scientifically, to link  
14 together the types found from different blood samples.  
15 Just to make sure I know what you're talking about, would  
16 you explain that general idea?

17 A Well, if you have different blood samples,  
18 different donors, you can't take the frequency of that  
19 person's blood type and link it together with the frequency  
20 of a person -- the second person's blood type. What you  
21 can do is you can say, "Well, in the general population I  
22 might find this combination in, say, three percent of the  
23 population or I might find this other combination in, say,

1 ten percent of the population." So at that particular  
2 point you can extrapolate a little bit and say, "Well, that  
3 probably represents thirteen percent of the total  
4 population might have this combination of factors."

5 But that still isn't specific to the sample  
6 in question. The sample in question is -- The  
7 distinguishing factors about the sample in question is what  
8 distinguishes it from the other -- all the individuals who  
9 have been tested, and that's where the focus has to be.

10 Q Okay. You note in the affidavit that  
11 there's no evidence as to when the blood stains were  
12 deposited and what caused the blood to be deposited, and I  
13 take it you agree that the serological typing is unable to  
14 determine when a blood sample was deposited; is that  
15 correct?

16 A I don't know of any method, serological,  
17 DNA, that can tell you how old a stain -- a biological  
18 stain is.

19 Q In paragraph 39 of your affidavit you state  
20 that the only blood types of significance from any of the  
21 samples are PGM, Gc, and EsD, and I wonder if you'd explain  
22 why -- what's your basis for making that statement.

23 A Well, again, going back to Mr. Moss's type

1 testimony, testing is designed to exclude the person who is  
2 not the true biologic donor of the stain.

3 Q I think that -- Let me see. You've already  
4 gone over 41, 42, and 43 in your affidavit, and you've  
5 already talked about there's no basis for assuming a single  
6 source. Your final conclusion in your affidavit is that  
7 based upon the foregoing analysis, the statistical  
8 conclusions are overstated in this case. And again, I take  
9 it, that relates back to some of the problems you've  
10 already discussed, and I don't guess we need to go through  
11 that again unless you have something to add to that.

12 A No, I don't have anything to add. It's -- I  
13 think this affidavit may be a little bit repetitious in the  
14 sense that I've stated some things several different ways,  
15 but I have done that in an effort to clarify my opinion  
16 that I have derived based on review of the test results in  
17 this case.

18 Q The final paragraph in the affidavit is that  
19 you generally concur with the statements concerning the  
20 scientific data that are set out in the habeas corpus  
21 petition on pages 29 through 36 without necessarily  
22 adopting all the particular language used, that's correct?

23 A That's correct.

1 and to taking item 7 as an example, those are the three  
2 systems where that stain could be distinguished from people  
3 in the Reggettz house. There's PGM, the 1+1- is not found  
4 in any of the people in the Reggettz house. Even though  
5 you find somebody with a 1 -- a 1-, you don't find anybody  
6 there with a 1+. So the 1+ is what really distinguishes  
7 the stain from -- in the PGM system and now you have 1+1-,  
8 so you would have to deal with that as a combination. You  
9 can't separate that out.

10 Esterase D, everybody in the Reggettz house  
11 is a 1, this sample has a 2-1, so that that 2 distinguishes  
12 the Esterase D in this stain from everybody in the Reggettz  
13 house.

14 The Haptoglobin is -- Well, Gc, I'm sorry,  
15 Gc, there's a 1 there. Everybody in the Reggettz house has  
16 a 2-1 in the Gc system, so if anybody -- and this, perhaps,  
17 illustrates it very well -- if anybody in the Reggettz  
18 house had been a source of that stain, you would expect to  
19 find a 2 present, as well, and you don't. So, you see,  
20 that eliminates anybody in the Reggettz house as a donor of  
21 this particular stain. It doesn't tell you who is the  
22 donor of that stain, it just eliminates them.

23 Again, it goes back to my previous

1 Q Maybe just as a final clean-up matter just  
2 to make sure that it's clear in the record, when you --  
3 when you go through -- when you went through your analysis  
4 on, let's go back to item number 7, the kitchen door  
5 curtain, and you talked about how you should focus on the  
6 types that are different from the known possible donors,  
7 and so you looked at the PGM, the EsD, and the Gc. And you  
8 stated that you should focus on those differences. I  
9 wonder if you'd explain -- and let's see if I can figure  
10 out a way of saying this -- what is the -- I guess the  
11 scientific problem with simply multiplying all of the  
12 samples or all the population frequencies that were found  
13 from item number 7 together, as opposed to simply focusing  
14 on the differences.

15 A There's nothing wrong with doing that. All  
16 that says is that I would -- when you did that calculation,  
17 that would say, "This combination of factors would be  
18 expected to be found in a certain portion of the  
19 population," in this particular case using the number that  
20 was calculated in this case, .03% of the population would  
21 have that combination of factors. There's nothing wrong  
22 with that.

23 The thing about it is, is before going to

1 that -- going ahead to make that calculation, one first has  
2 to decide what distinguishes this stain from any other  
3 stain that's present. And my point is, is that the PGM,  
4 the Esterase D, and the Gc types are what distinguish this,  
5 and I have to couple that with the scientific fact that I  
6 have no way of telling whether or not this is a mixture of  
7 a single stain or multiple donors to the stain. And this  
8 would be true whether this was DNA testing or serological  
9 testing.

10 All one can do is report the data as one  
11 sees it and say, "This is how often I would expect to find  
12 this combination of markers." It's a unique or it's not --  
13 it's a rare combination or it's not very rare at all. It  
14 would be like a verbal description of the scientific  
15 result. But the -- But beyond that, it's really difficult  
16 to say much more.

17 And at that point it's really up to  
18 everybody else who is involved in looking at this evidence  
19 to come to a decision as to how that stain could have  
20 gotten there if, in fact, an individual is the donor of  
21 that stain. All we can do is just say, "This is what the  
22 scientific data said."

23 Q Would it be accurate to say that by giving

1 additional calculation that you've been talking to where  
2 you focused on the differences in each sample?  
3 A There isn't anything really mandatory in  
4 doing this. It really is based on understanding how  
5 genetic systems work and coupling that with the experience  
6 of the forensic scientist who appreciates the nature of the  
7 samples that are being studied. Population geneticists  
8 never run into this problem. When you get a tube of blood,  
9 you know it came from a single person, you do a typing on  
10 that and you say, "Oh, this is a rare combination of  
11 markers in this individual." There isn't any question  
12 about where that sample came from.

13 A stain collected off a disorganized scene,  
14 that are frequently what happens in a forensic situation,  
15 at that point all we can do is test what is there, say,  
16 "This is what I found. Here's a" -- If all of these  
17 were -- all of these markers would be expected to be found  
18 in a certain combination, these are the markers that  
19 distinguish this stain from -- and make this person as a  
20 possible donor of that stain.

21 For example, and one of the statements that  
22 might be said about this is that -- and then allow the  
23 individuals who are going to make decisions about this to

1 what I'll call the general population frequency number on  
2 item number 7, that would essentially give you the number  
3 that is the most discriminating number versus the  
4 calculation you make by multiplying the population  
5 frequencies of the types that are different. So in other  
6 words, you would be providing the range, one includes  
7 everything together, and I think implicitly --

8 A Yes.

9 Q -- it says it's a single source --

10 A Yes.

11 Q -- and the other is taking into account  
12 well, this may be a mixed sample, but here is where these  
13 three different types and what the population frequencies  
14 would be there?

15 A And that could still be a very compelling  
16 number.

17 Q Right.

18 A Even the range can be a very compelling  
19 component.

20 Q And just so I also make it clear, are you  
21 saying that the calculation method that you have discussed  
22 here is what would have been appropriate, is it what would  
23 have been mandatory, or how would you describe the

1 come to their own conclusions -- one might say that, for  
2 example, on the stain on the kitchen door Mr. Moss couldn't  
3 be excluded in the PGM, the Gc, and the Esterase D systems.  
4 That just says where -- what distinguishes that sample from  
5 all the others.

6 And then if you want to know what this  
7 combination is, then you could go and say a combination of  
8 1+ -- PGM 1+, EsD 2-1, and Gc 1 is a certain number, and  
9 the combination of type O blood, PGM 1+2+, AK 1, BA, for  
10 EAP 2-1, for EsD, ADA 1, 2 for GLO 1, 2-1 for Haptoglobin,  
11 and Gc 1, that's found in three percent of the  
12 population -- or .03% of the population.

13 And at that particular point the scientist  
14 has done their job, presented you with the best possible  
15 data that you can use, and at that point the decision is  
16 now up to those people involved in the process who actually  
17 have to make the next decision in relationship to what this  
18 -- how this data is going to be used in the case being  
19 tried.

20 Q Let me maybe just ask for clarification,  
21 then, in the affidavit, just to make sure the record is  
22 clear. And I'd ask you to look at paragraph 43 of your  
23 affidavit, and maybe if you'd just read that to yourself



1 and then --

2 A (Witness examines document.) Well, what  
3 paragraph 43 says is it addresses the issue about I don't  
4 know if these are mixtures or not, and there's no way I can  
5 tell that.

6 Q And under --

7 A Under those circumstances, all I can say is  
8 what distinguishes it and make a statement to that effect,  
9 and then to the extent that that is helpful, the numbers  
10 are helpful, one can sort of narrow down the range of  
11 people who might be -- have that unique combination of  
12 markers not shared by other people. And then beyond that,  
13 one can also, accurately and without overstating the facts,  
14 find out what a whole series of combination of markers  
15 might be expected to be found in the general population.  
16 But those are all separate items that have to be taken into  
17 account in light of where that sample came from.

18 Q And then in paragraph 41, the way I read  
19 that is that where you find the different types, you can  
20 state the population frequency for those different types,  
21 but you -- for statistical purposes, you should not  
22 multiply them together. Just let me make sure I understand  
23 here.

1 A Not unless you know for sure that it's a  
2 single source blood sample.

3 Q Okay. So when you were giving your general  
4 example in item number 7, and let's say you found a  
5 population frequency for the PGM type and for the Gc type,  
6 you're saying that it would be appropriate to state those  
7 particular population frequencies, but you should not  
8 multiply them together unless you know for a fact that  
9 there's a single source?

10 A With respect to that sample, that specific  
11 sample, you really don't know. You don't know. I mean you  
12 can calculate things, but to -- but to say that I could say  
13 with certainty about this sample, that this is a single --  
14 that this combination of factors is what's -- this is how  
15 often I'm going to find this combination of factors, you  
16 have to also be able to state with an equal amount of  
17 certainty that it's also a single source sample. And  
18 that's the problem with all forensic testing.

19 MR. SIMMONS: I think that's all the  
20 questions I have.

21 EXAMINATION

22 BY MS. KERSHNER:

23 Q Doctor Bing, your testimony on direct was

1 that it's -- that except where you are certain that you  
2 have a single source on a blood sample, such as taking a  
3 known blood sample from a suspect, there you know that  
4 you've got a single source donor, correct?

5 A (Witness nods affirmatively.)

6 Q But that under other circumstances where  
7 evidence is collected like at a crime scene, that you  
8 cannot be certain that it's a single source donor; is that  
9 correct?

10 A These are -- Yes, these are stains, stains  
11 collected at a crime scene, as opposed to something that's  
12 taken from an individual, for example, a blood sample, a  
13 cell sample, a swab, something like that where you actually  
14 know where it came from.

15 Q If a person who has some expertise in  
16 serology, however, has collected the stains or examined the  
17 stains in some fashion at the crime scene or immediately  
18 afterwards, is there any way that, in addition to typing of  
19 the blood, the general condition of the stain could  
20 indicate whether it's a single source or possibly a  
21 multiple source?

22 A Well, I'm not a crime scene investigator,  
23 but as I understand it, there are ways to, in terms of

1 looking at splatter patterns of blood, for example, if a  
2 blood stain is found in and around a victim that's lying on  
3 the floor or something like that, people who have spent a  
4 lot of time investigating crime scenes would probably  
5 testify to the fact that it would be inconsistent with all  
6 their experience that this could have come from anything  
7 but a single individual. But a stain -- But the whole  
8 scene has to be looked at together from that point of view.  
9 It literally requires a great deal of experience and  
10 expertise. There are people who can do that. There are  
11 people who know how to do that.

12 Q Now, where there is a mixture or a suspected  
13 mixture of blood, such as at a crime scene, on clothing or  
14 other exhibits from a crime scene, would it be normal,  
15 where there is a mixture or a suspected mixture, to find a  
16 different intensity in the banding? For example, if  
17 there's an A, the victim is type A, the suspect is type B,  
18 and where -- the area where you're testing shows both A and  
19 B, would you then be able to conclude that there was a  
20 mixture?

21 A In serological testing that's not of the  
22 one -- it's my understanding it's not one of the criteria  
23 by which the test is set up. Certainly I would be the last

1 person to deny that an experienced serologist, if they had  
2 had a lot of experience in dealing with mixtures, and they  
3 have accumulated experience in that area, they could  
4 probably testify to that, based on their experience, this  
5 looked to them like a mixture. I would accept that.  
6 But, you know, at least to my knowledge, the  
7 procedures that describe, for example, how EAP or Esterase  
8 D is done, mixtures would be very hard to pick out, would  
9 be very hard to pick out. With Haptoglobin and Gc, those  
10 are systems with which I'm very familiar. Minor types are  
11 not often interpreted as a result of being a mixture,  
12 because even in a single source sample, sometimes you will  
13 pick up a minor type just because of the nature of these  
14 systems.

15 Q You also testified about the lack of  
16 protocol at the laboratory -- lack of written protocol at  
17 the West Virginia State Police Serology Laboratory in 1979.  
18 But at that time, was it usual for a laboratory of that  
19 type, in other words, a state run laboratory, forensic-type  
20 laboratory, was it usual for that laboratory to have  
21 written protocols?

22 A I truly have no specific knowledge about  
23 forensic testing because I really didn't start doing this

1 until around 1989, 1990. And protocols were just something  
2 that I always had, so it was a surprise to me to hear from  
3 people in the field that this was not an uncommon practice  
4 in certain laboratories. But I have no specific knowledge  
5 about what was generally practiced in the field at that  
6 time. I mean I do have documented the FBI had a written  
7 protocol in 1974, and it's actually a very useful protocol  
8 because it has a lot of the original development of these  
9 systems, which from a scholarly point of view, is a very  
10 useful piece of paper.

11 MS. KERSHNER: I have nothing further.

12 MR. SIMMONS: Okay. I don't have any  
13 follow-up questions. The court reporter needs to hear you  
14 waive your signature, if you so desire, or not waive.

15 THE WITNESS: I waive my signature.

16 (WITNESS STANDS ASIDE.)

17 (WHEREUPON, the deposition was

18 concluded at 3:00 o'clock p.m.)

REPORT , CERTIFICATE

STATE OF WEST VIRGINIA,

COUNTY OF KANAWHA, to-wit:

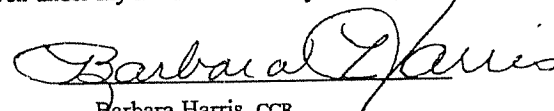
I, Barbara Harris, Notary Public within and for  
the State of West Virginia, duly commissioned and  
qualified, do hereby certify that the foregoing deposition  
of DAVID H. BING was duly taken by and before me, under the  
West Virginia Rules of Civil Procedure, at the time and  
place and for the purpose specified in the caption thereof;  
the said witness having been duly sworn by me to testify  
the whole truth and nothing but the truth concerning the  
matter in controversy.

I do certify that the said deposition was  
correctly taken by me by means of the Stenomask; that the  
same was transcribed under my supervision, and that the  
said transcript is a true record of the testimony given by  
said witness.

I further certify that I am not connected by  
blood or marriage with any of the parties to this action,  
am not a relative or employee or attorney or counsel of any  
of the parties, nor am I a relative or employee of such  
attorney or counsel, or financially interested in the  
action, or interested, directly or indirectly, in the  
matter in controversy.

It is stipulated and agreed that the signature of  
the witness is hereby expressly waived to the foregoing  
deposition.

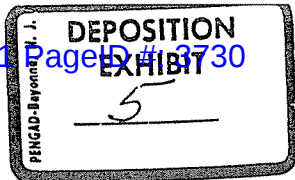
Given under my hand this 16th day of June, 1995.



Barbara Harris, CCR

Notary Public

My commission expires August 30, 2003.

**TABLE I\*****KNOWN BLOOD SAMPLES**

<b>PERSON</b>	<b>ABO</b>	<b>PGM</b>	<b>AK</b>	<b>EAP</b>	<b>EsD</b>	<b>ADA</b>	<b>GLO I</b>	<b>Hp</b>	<b>Gc</b>
Vanessa Reggett	<i>O</i>	2+1-	<i>1</i>	B	<i>1</i>	<i>1</i>	<i>2</i>	<i>1</i>	2-1
Bernadette Reggett	<i>O</i>	2+2+	<i>1</i>	B	<i>1</i>	<i>1</i>	<i>2</i>	2-1	2-1
Paul Eric Reggett	<i>O</i>	2+1-	<i>1</i>	B	<i>1</i>	<i>1</i>	<i>2</i>	2-1	2-1
Paul Reggett III	<i>O</i>	2+2-	<i>1</i>	BA	<i>1</i>	<i>1</i>	<i>2</i>	<i>2</i>	2-1
John Moss, III	<i>O</i>	1+1-	<i>1</i>	BA	2-1	<i>1</i>	<i>2</i>	2-1	<i>1</i>

\*The shared blood attributes between Petitioner's known blood types and the blood types of the Reggett family are highlighted in Table I to emphasize the similarities and differences in the known blood types.



**TABLE I\*****KNOWN BLOOD SAMPLES (CONTINUED)**

<b>PERSON</b>	<b>ABO</b>	<b>PGM</b>	<b>AK</b>	<b>EAP</b>	<b>EsD</b>	<b>ADA</b>	<b>GLO I</b>	<b>Hp</b>	<b>Gc</b>
Jack C. Neal, Jr.	?	?	?	?	Not 2-1	?	?	?	?
Roger L. Province	?	?	?	?	Not 2-1	?	?	?	?
William J. Monk	?	?	?	?	Not 2-1	?	?	?	?
Ross E. Gillespie	?	?	?	?	Not 2-1	?	?	?	?
Marvin D. Smith	?	?	?	?	Not 2-1	?	?	?	?
Richard A. Rollins	?	?	?	?	Not 2-1	?	?	?	?
Joseph Morehouse	?	?	?	?	Not 2-1	?	?	?	?
Nathaniel Brown	?	?	?	?	Not 2-1	?	?	?	?
Thomas F. White	?	?	?	?	Not 2-1	?	?	?	?

\*Petitioner has been unable to find any explanation as to why the blood of Jack C. Neal, Jr., Roger L. Province, William J. Monk, Ross E. Gillespie, Marvin D. Smith, Richard A. Rollins, Joseph Morehouse, Nathaniel Brown, and Thomas F. White was tested.

TABLE II\*

## UNKNOWN BLOOD SAMPLES

ITEM	ABO	PGM	AK	EAP	EsD	ADA	GLO I	Hp	Gc
1. Knife pieces	O	2-1	1	B	1	1	2	?	?
2. Room next to bath	O	2-1	1	B	1	1	2	?	?
3. Front bedroom carpet	O	2-1	1	B	1	1	2	?	?
4. Bedspread front bedroom	O	2-1	1	B	1	1	2	?	?
5. Pillow case front bedroom	O	2-1	1	B	1	1	2	?	?
6. Electrical cord	O	2-1	1	B	1	1	2	?	?
7. Kitchen door curtain	O	1+1-	1	BA	2-1	1	2	2-1	1
8. Sheet kitchen floor	O	2-1	1	B	1	1	2	?	?
9. Back door handle	O	2-1	?	?	?	?	?	?	?
10. Kitchen sink	?	?	?	?	?	?	?	?	?
11. Utensil drawer	O	1	1	BA	2-1	1	2	?	?
12. Pillow case bedroom beside bath	O	1	1	BA	2-1	1	2	?	?
13. Door between bedroom and living room	O	2-1	1	B	1	1	2	?	?
14. Door between bedroom and front door	O	1	1	BA	2-1	1	2	?	?
15. Change purse	O	1	1	BA	2-1	1	2	?	?
16. Medium t-shirt	O	2-1	?	?	1	?	?	?	?
17. Jockey shorts	?	?	?	?	?	?	?	?	?
18. Vanessa Reggett's nightgown	O	2-1	1	B	1	1	2	?	?
19. Doll	O	2-1	1	B	1	1	2	?	?

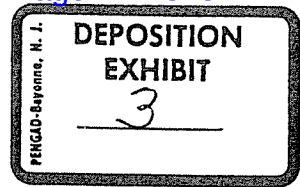
\*The blood types obtained from the unknown blood samples that are identical to the known blood types obtained from Vanessa Reggett, Paul Eric Reggett, Bernadette Reggett, or Paul Reggett, III, are highlighted in Table II.

**TABLE II****UNKNOWN BLOOD SAMPLES (CONTINUED)**

ITEM	ABO	PGM	AK	EAP	EsD	ADA	GLO I	Hp	Gc
Table knife	?	?	?	?	1	?	?	?	?
Christmas wrapping paper	O	1+1-	1	BA	2-1	1	2	2-1	1
Flashlight	O	1	1	BA	2-1	1	2	?	?
Clothing of Bernadette Reggett	O	1+1-	1	BA	2-1	1	2	2-1	1



## CURRICULUM VITAE



NAME: David Howard Bing

ADDRESS: CBR Laboratories  
800 Huntington Avenue, Boston, MA 02115  
Phone #: (617) 278-3450

HOME ADDRESS: 27 Waverly Street, Brookline, MA 02146

DATE OF BIRTH: August 3, 1938

PLACE OF BIRTH: E. Cleveland, Ohio

## EDUCATION:

1960 B.A. Wesleyan University, Middletown, CT  
(Distinction in Biology)  
1966 Ph.D. Western Reserve University, Cleveland, OH  
(Microbiology and Biochemistry)

## POSTDOCTORAL TRAINING:

1966-1968 University of California, Berkeley, CA  
(Bacteriology and Immunology)

## RESEARCH FELLOWSHIPS:

1960-1966 NIH Predoctoral Fellow  
1966-1968 American Cancer Society Postdoctoral Fellow  
1970-1971 Chercheur Etranger of INSERM, Hopital Necker, Clinique Nephrologique,  
Paris, France  
1972-1973 Research Career Development Awardee, NIH  
1976-1981 Established Investigator, American Heart Association  
1982-1983 NIH Senior Fellowship, Dept. Cell Biology, Children's Hospital,  
Harvard Medical School, Boston, MA

## LICENSURE AND CERTIFICATION:

1987 Certified Technical Director of Clinical Reference  
Laboratory in Commonwealth of Massachusetts  
1988 Certified Technical Director for Paternity Testing by American  
Association of Blood Banks  
1989 Certified Technical Director of Clinical Reference Laboratory in New  
York, Maryland, and Connecticut  
1995 Certified Laboratory Director of Diagnostic Immunology, Immuno-  
hematology, and Paternity/Identity Testing in the State of New York

## ACADEMIC APPOINTMENTS:

1968-1971 Assistant Professor, Dept. of Microbiology and Public Health,  
Michigan State University, E. Lansing, MI  
1971-1973 Associate Professor (Tenure), Depts. of Microbiology and Public  
Health and Human Development, Michigan State University,  
E. Lansing, MI  
1973-1978 Principle Research Associate, Dept. Biological  
Chemistry, Harvard Medical School  
1978-1983 Instructor, Dept. Biological Chemistry, Harvard Medical School  
1992-Present Principal Associate in Pediatrics, Department of Medicine, Harvard  
Medical School, Boston, MA

BING, David H.

**NON-ACADEMIC APPOINTMENT:**

1983-1986 Associate Director of Biological Sciences, Cambridge Research Laboratories, Ortho Diagnostics Systems Inc., Cambridge, MA  
 1992-Present Adjunct Faculty, College of Pharmacology and Allied Health Sciences, Northeastern University, Boston, MA

**HOSPITAL APPOINTMENTS:**

1973- Senior Investigator, The Center for Blood Research, Boston, MA  
 1973- Research Associate in Immunology, Children's Hospital, Boston, MA  
 1980-1983 Associate in Medicine, New England Deaconess Hospital, Boston, MA  
 1983- Sr. Research Associate in Medicine, Beth Israel Hospital, Boston, MA  
 1986-1994 Vice President and Scientific Director, CBR Laboratories, Inc.  
 (A subsidiary of The Center for Blood Research)  
 1988- Director of Laboratories, The Center for Blood Research, Boston, MA  
 1994- Director of Clinical Research Testing, CBR Laboratories, Inc., Boston, MA

**MAJOR COMMITTEE ASSIGNMENTS:**

1969-1973 Chairman of Graduate Committee (Admissions and Thesis Defense Committee) Dept. Microbiology and Public Health, Michigan State University  
 1975-1983 Ad Hoc Reviewer for National Cancer Institute Program Project Grants, NIH  
 1975-1983 Ad Hoc Reviewer for National Heart, Lung, and Blood Institute, NIH  
 1979 NHLBI Committee which Prepared 10-year Summary of Research in the Area of Blood Resources  
 1980- Ad Hoc Reviewer Allergy and Infectious Disease Study Section, NIH  
 1980- Ad Hoc Reviewer, National Science Foundation  
 1980-1983 Plasma Derivatives Review Group, American Red Cross, Washington, DC  
 1986- Reviewer Special Study Section for Small Business Innovative Research, NIH

**EDITORIAL BOARDS:**

1979- Associate Editor Molecular Immunology  
 1980-1984 Associate Editor, Journal of Immunology  
 1980- Ad Hoc Reviewer, Biochemistry  
 1984- Ad Hoc Reviewer, Journal of Immunology

**MEMBERSHIPS IN PROFESSIONAL SOCIETIES:**

1966 Sigma Xi  
 1969- American Association of Immunology  
 1969-1987, 1992- American Chemical Society  
 1969- American Association for Advancement of Science  
 1983- American Association of Clinical Chemistry  
 1989- International Society for Forensic Haemogenetics  
 1990 American Academy of Forensic Sciences  
 1990- Association of Northeast Forensic Scientist

**MAJOR RESEARCH INTERESTS:**

1. Therapeutic Plasma Protein Derivatives
2. Immunodiagnosics for the Blood Bank
3. DNA Probe Diagnostics for the Blood Bank and Genetic Testing
4. DNA Forensic Testing

BING, David H.

**TEACHING EXPERIENCE:**

1950-1966	Teaching Assistant, Dept. Microbiology, Western Reserve University, Cleveland, OH
1968-1973	Graduate Course in Immunochemistry, Dept. Microbiology Public Health, Michigan State University
1968-1973	Seminar Chairman, Dept. of Microbiology and Public Health, Michigan State University
1968-1970	Seminars in Immunology, Dept. Biochemistry, Michigan State University
1972	Video Course in Basic Immunology for medical students, veterinary students, medical technologists, nurses, undergraduates, Dept. Microbiology and Public Health, Michigan State University
1973-1976	Advanced Biochemistry, Dept. Biological Chemistry, Harvard Medical School
1973-1980	Seminar Chairman at The Center for Blood Research
1992	Foundations of Forensic Sciences, Northeastern University, Boston, MA

**CONTINUING EDUCATION:**

1985	Gordon Conference of Cancer
1985	Federation of American Society for Experimental Biology and Medicine - American Association of Immunologists
1986	Federation of American Society for Experimental Biology and Medicine - American Association of Immunologists
1987	American Association of Blood Banks.
1988	American Association of Clinical Chemistry
1989	American Association of Clinical Chemistry
1989	13th Congress for the Society of Forensic Haemogenetics
1989	American Association of Blood Banks
1989	UCLA Symposia on Molecular and Cell Biology - Defense Molecules
1989	Promega International Symposium on Human Identification
1990	American Academy of Forensic Sciences
1990	American Association of Clinical Chemistry
1991	Second Promega International Symposium on Human Identification
1991	American Academy of Forensic Sciences
1992	American Academy of Forensic Sciences
1992	Third Promega International Symposium of Human Identification
1993	American Academy of Forensic Sciences
1993	Jackson Laboratory Short Course on Advance Human and Mammalian Genetics
1993	Fourth Promega International Symposium of Human Identification

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3. Patrea L. Pabst and David Bing: Electrodialysis preparation of purified AHF concentrate. 4,435,318. March 6, 1984.

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3/21/95



IN THE CIRCUIT COURT OF KANAWHA COUNTY, WEST VIRGINIA

**JOHN MOSS, III,**

Petitioner,

v.

Civil Action No. 94-MISC-663

**GEORGE TRENT,** Warden of the  
West Virginia State Penitentiary,

Respondent.

**PETITIONER'S MOTION FOR PRODUCTION  
OF RECORDS RELATING TO TROOPERS MICHAEL DON SMITH  
AND TERRY WILLIAMS**

Petitioner John Moss, III, respectfully moves the Court for an order requiring Respondent to produce, under the seal of this Court, all personnel records maintained by the Department of Public Safety on Troopers Michael Don Smith and Terry Williams, including, but not limited to, their complete personnel files, all documentation relating to any hearings held in connection with any disciplinary actions, and all documentation relating to any formal or informal investigation relating to Petitioner's case, for the following reasons:

1. Trooper Michael Don Smith and Trooper Terry Williams were the main law enforcement officers involved in the investigation of the Reggettz murders and the confessions given by Paul Reggettz, III, and Petitioner.
2. In the habeas corpus petition, Petitioner has raised the issue of whether his confessions were obtained in violation of his constitutional rights.

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CATHY GATSON, CLERK  
KANAWHA COUNTY CIRCUIT COURT

Kanawha County  
**OFFICE OF THE PROSECUTING ATTORNEY**

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WILLIAM C. FORBES  
Prosecuting Attorney

November 22, 1994

Lonnie Simmons, Esquire  
DiTrapano and Jackson  
604 Virginia Street East  
Charleston, WV 25301

RE: Moss v. Trent  
94-MISC-663

Dear Mr. Simmons:

Enclosed please find a copy of the serological records from the West Virginia State Police in the above-referenced case. This is the raw data that Judge MacQueen directed be delivered to you.

I am also submitting copies of this data to Judge MacQueen and to the Circuit Clerk to enclose in the case file. Thank you for your attention to this matter.

Very truly yours,

*Mary Beth Kershner*

Mary Beth Kershner  
Assistant Prosecuting Attorney

cc: Hon. A. Andrew MacQueen, Circuit Judge  
Hon. Cathy Gatson, Circuit Clerk

*[Handwritten signature]*

3. Petitioner's intention in raising this constitutional issue, which was raised in both of his trials and in the hearings held during the juvenile transfer proceedings, was to develop new evidence relevant to the issue.

4. Petitioner has information that an informal investigation may have been conducted by the Department of Public Safety into certain allegations made against Troopers Michael Don Smith and Terry Williams directly related to the underlying facts of this case.

5. If such an investigation had been conducted, clearly any documentation related to such investigation is relevant to Petitioner's habeas corpus action.

6. If no such investigation had ever been conducted, then Petitioner needs to develop this fact on the record, with a member of the Department of Public Safety testifying under oath after making a thorough search of the records.

7. Presumably, if such an investigation occurred, there may be some documentation in the personnel files of these two troopers relating to the investigation.

8. Requests for the production of documents and other discovery in a habeas corpus action was discussed by the West Virginia Supreme Court in *Gibson v. Dale*, \_\_\_ W.Va. \_\_\_, 319 S.E.2d 806 (1984), which held in Syllabus Point 5:

"A habeas corpus petitioner is entitled to careful consideration of his grounds for relief, and the court before which the writ is made returnable has a duty to provide whatever facilities and procedures are necessary to afford the petitioner an adequate opportunity to demonstrate his entitlement to relief."

9. As to the right of a habeas corpus petitioner to discovery, the West Virginia Supreme Court stated:

"The right to access to relevant evidence in the possession of the State is a component of the right to full consideration of one's claims. Certainly, the habeas petitioner, by virtue of his status as a prisoner, is almost always at a disadvantage in developing the evidence necessary to support his allegations. The court to which a motion for production of documents or records is addressed in a habeas proceeding should exercise flexibility in ruling on the motion. Where the petitioner can demonstrate that materials in the possession of the State contain relevant evidence which would enable him to prove specific allegations entitling him to relief, the court should grant the motion." \_\_\_\_ W.Va. at \_\_\_\_, 319 S.E.2d at 814.

10. Petitioner respectfully submits that all of this documentation, including all documents in the personnel files maintained on Troopers Michael Don Smith and Terry Williams, are relevant and critical to the final determination of the issues raised in the habeas corpus petition.

11. Any concerns Respondent may have regarding the privacy of the officers involved will be protected by having their complete personnel files produced under seal for review by this Court, which can determine whether any of the information contained in the files is relevant to Petitioner's habeas corpus action.

12. Without this documentation, the issues raised in connection with the confessions cannot be resolved.

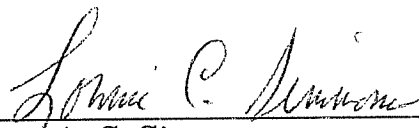
For the foregoing reasons, Petitioner John Moss, III, respectfully moves the Court for an order requiring Respondent to produce, under the seal of this court, all personnel records maintained by the Department of Public Safety on Troopers



Michael Don Smith and Terry Williams, including, but not limited to, their entire personnel files, all documentation relating to any hearings held in connection with any disciplinary actions and all documentation relating to any formal or informal investigations relating to Petitioner's case.

**JOHN MOSS, III**, Petitioner,

--By Counsel--



---

Lonnie C. Simmons  
DI TRAPANO & JACKSON  
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Charleston, West Virginia 25301  
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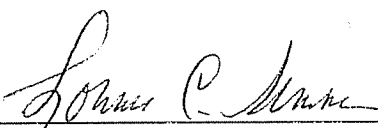
### **CERTIFICATE OF SERVICE**

I, Lonnie C. Simmons, do hereby certify that a copy of the foregoing **PETITIONER'S MOTION FOR PRODUCTION OF RECORDS RELATING TO TROOPERS MICHAEL DON SMITH AND TERRY WILLIAMS** was served upon counsel of record on the 11th day of April, 1995, by the United States Postal Service, postage prepaid.

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95 APR 13 AM 8:56  
CLERK  
KANAWHA COUNTY JUDICIAL COURT

  
\_\_\_\_\_  
Lonnie C. Simmons